

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000115782

**Entity Name:** FOUNTAIN FEED & SUPPLY LLC

**Current Principal Place of Business:**

17935 LAZY LANE  
FOUNTAIN, FL 32438

**Current Mailing Address:**

7217 WASHINGTON AVE  
SOUTHPORT, FL 32409

**FEI Number:** 45-3566904

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIODO, KRISTI  
7217 WASHINGTON AVE  
SOUTHPORT, FL 32409 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CHIODO, KRISTI  
Address 7217 WASHINGTON AVE  
City-State-Zip: SOUTHPORT FL 32409

Title MGRM  
Name CHIODO, ANTHONY PJR.  
Address 7217 WASHINGTON AVE  
City-State-Zip: SOUTHPORT FL 32409

Title VP  
Name CHIODO, ANTHONY PIII  
Address 7217 WASHINGTON AVE  
City-State-Zip: SOUTHPORT FL 32409

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KRISTI CHIODO

MGRM

04/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date